

The Dynamics of Preparing Children with Special Educational Needs to Start Schooling in Tanzania

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Abstract

This paper presents findings on how parents and teachers prepared children with Special Educational Needs (SEN) to start schooling. Information was sought from a sample of 84 participants in two districts in Tanzania using in-depth interviews, focused group discussion and non-participant observation. The collected data were subjected to thematic analysis. The study revealed that parents and teachers have a big role to play in preparing children with SEN to transit smoothly from home environment to start school. However, the transition process was not straight forward. It had some financial, social, and psychological implications on both parents and teachers. The study recommends, among others for parents' and community's awareness raising about children with SEN.

Keywords: *disability, transition, inclusive schools*

Introduction

All children whether with or without disability progress through several life transitions and each is a pivotal point of development and growth for them, their parents and family members (Grant, Knight & Busch, 2017). Transition is a concept that implies change and movement. It is a passage from one stage to another and is a lifelong process and part of everyone's life (Pattoni & Kimii, 2016). In the context of education and learning, some transitions may involve major changes like when children move a) from home to school for the first time or from pre-school provision to primary school, b) from primary school to secondary school, and c) from secondary school to tertiary education (e.g. vocational training, college or university). While all of these transitions are worthy of discussion, this paper will focus on one particular transition i.e., the transition from home environment to starting schooling for the first time for children with SEN.

There is enough research evidence which show that the transition from home environment to the first year of schooling is essential for the child's future physi-

cal, emotional and intellectual development (Then and Pohlmann-Rother, 2023). However, it is also widely accepted that while the process of transition from home to school is important for all children, it is of particular importance for children with disabilities and Special Educational Needs (SEN) who may have additional concern. Children with SEN have a learning difficulty or disability which makes it much harder for them to learn than other pupils of the same age (Balli, 2016). They may also have other specific special needs as per their disability that compels more attention. Thus, children may need more support and this situation calls for proper planning and preparation.

In Tanzania, starting school begins with pre-primary education at the age of 5-6. However, in the context of this study, to start schooling implies the time when a child with SEN is sent to school for the first time. Unlike children without disability and even those with disabilities that do not affect or interfere with learning, children with SEN do not necessarily follow the same stages as those without disabilities who begin with pre-primary education. Rather, they are categorized in levels 1, 2, 3 and 4. Basic skills of reading, writing and counting are not taught until when they have mastered the adaptive behaviours. These are skills necessary for day-to-day life that individuals should be able to perform at a certain age. Such skills include greeting, cleaning oneself, washing hands before and after eating, dressing, toileting, self – feeding, interacting with others, and taking care of oneself. Experience shows that children with special needs are most likely to delay in these areas. A good example is children with intellectual impairment who develop more slowly than other children of the same age. Sometimes it takes longer for such child to learn to speak, walk, dress, or eat without help. Therefore, parents deliberately delay to send them to school fearing that they will find it difficult to learn in school. There is no specific age range but in the schools visited for this study, the age range in the special education classes was between 7 to 16 years.

The context

Provision of educational opportunities for children with SEN has a long history in Tanzania. It can be traced back to the 1950s when the first special school was established by European missionaries (Church Missionary Society) at Buigiri in Dodoma to meet the needs of children with visual impairment (Possi & Milinga, 2017). At that time, the government had not ventured into special needs education. Consequently, quite a large number of children with disabilities were left at home due to ignorance; stigma and superstitions attached to causes of disability and the disability conditions.

In 1963 the government joined efforts with the European missionaries to provide special needs education in Tanzanian schools. Uhuru Primary School in Dar es Salaam was then opened as an integrated school for children with visual impairment. With this breakthrough more integrated schools were established. Following the Salamanca Statement and Frame for Action and Special Needs Education in 1994 which called for countries worldwide to move towards inclusive approaches, Tanzania started to implement inclusive education in 1997 (Possi & Millinga, 2017). Concurrent with the decision to move towards inclusion, Tanzania also developed a National Policy on Disability in 2004 (United Republic of Tanzania (URT), 2004) to provide guidelines and to set parameters for service delivery. The policy acknowledged that education was a key to the development of children with disabilities' potential and that they should be given priority. It states: *The government, in collaboration with stakeholders, shall provide a conducive environment for inclusive education that takes care of the special needs of disabled children (URT, 2004, p16).*

Since 2004, the government has been making concerted efforts to ensure that children with special educational needs are admitted in the mainstream of formal schooling through three different models, namely special schools, integrated schools and inclusive education. Special schools on the one hand cater for children who have special and additional educational needs due to learning difficulties or behavioural problems. These schools are normally run separately from conventional schools. They have a special designed form of instruction to cater for the unique needs and abilities of children with special educational needs. Unlike the special education model, the integrated model, on the other hand, incorporates children with special needs into regular schools. Children with special educational needs are able to attend regular schools but are usually taught in a separate special unit or class (URT, 2004).

Inclusive education as the third model promotes the education of all children in the same school and classroom environment, without discriminating them by disability or other special needs (Possi & Millinga, 2017). The classroom is seen as a place where all children, despite their special educational needs, have the right to belong, talk, walk, work and share together. According to Frederickson and Cline (2009), it is sometimes very difficult to draw a clear cut line between inclusive education and integrated models, although they are theoretically different. While integration is about making a limited number of additional arrangements for individual pupils with SEN in schools, inclusion, on the other hand, implies the introduction of a more radical set of changes through which schools restructure themselves so as to be able to embrace all children. Presently, based on the three models, at least each disability category is provided with education in Tanzania (URT, 2022).

Tanzania's commitments and efforts towards equality in education have further

been strengthened by the 2014 Education and Training Policy (MoEVT, 2014) and the global initiatives of which Tanzania has also signed and ratified. These include the Universal Declaration on Human Rights (Article 26); Convention on the Rights of Persons with Disabilities (Article 24), UNESCO Convention against Discrimination in Education (Articles 4), The 1990 World Conference on Education for All (EFA), The Dakar Framework for Action (DFA); the Millennium Development Goals (MDG) and now the Sustainable Development Goals (SDGs) which set goals to be achieved by all nations by 2030. Nonetheless, there has been a growing concern that despite the Governments' efforts and commitment to provide equal access to education for all children in Tanzania, discrepancy still persists. The enrolment of children with SEN remains low. The Ministry of Education, Science and Technology (MoEST, 2018) indicates that the percentage of children with SEN enrolled in primary schools was very low; at the range of only 0.43 per cent by 2018. The situation has not changed much to-date (URT, 2022). This is a bleak picture which cannot be left to continue.

Several factors have been indicated as contributing to the less enrolment status for school children with special needs and disabilities in developing countries like Tanzania. According to Thompson (2017), access to school for children with disabilities is often limited by practical reasons associated with planning and preparation among key players on the specific education needs for children with disabilities to join and stay in school.

The essence of planning and preparation for successful transition to school

It is evident from research that where parents have been actively involved in the planning and preparation for their children with SEN, the process of transition from home to school has been smooth and the take-off to start schooling has been successful (Veitch, 2017, Bariroh, 2018 and Bessi & Sakellariou, 2019). This is due to the fact that parents and guardians know their children better than anyone else and have the most complete understanding of a child's physical, social, developmental, and family history. They also provide the resources as well as social, cultural, and emotional supports that children need to function successfully at school (Dockett, Perry & Kearney, 2012). Together with the potential role of parents, it is also evident that successful transition to school for children with disabilities and SEN depends very strongly on the supports available at the school and the ability of the school to accommodate the individual children's needs (Mapunda et al., 2017; UNICEF, 2012). Parental engagement with children's learning is effectively supported when parents receive clear, specific and targeted information from schools. The two agencies (family and school) have to collaborate together to ensure effective preparation and smooth transition to school of these children.

Experiences from other developed countries

Recognising the significance of preparation and planning beforehand, some countries especially those from the developed world have designed a range of disability support services and programmes for children to promote social adjustment and prepare them to start schooling smoothly (Dockett & Perry, 2001). In Singapore, for example, guidelines have been developed which includes steps and advice to parents on what they ought to do before sending their children with SEN to a mainstream school (Aljunied, 2019). According to Aljunied, parents should first consult professionals who have worked closely with their children, such as psychologists, developmental paediatricians and early intervention teachers on whether the child should consider attending mainstream or Special Education schools. As children with more severe SEN require intensive specialised support in the long-term, their learning needs can be better supported in special education (SPED) schools. In such schools, these are the professionals who have a clear idea of the children's needs and areas of strengths. It is important to heed their advice. However, of even more importance according to this psychologist is that parents must also provide the school with clear information about the child's learning needs in order to allow them to have a better understanding of the child's needs. The school can then take the appropriate steps and provide the necessary support to help the child make the transition into a mainstream setting.

Similarly, in Ireland, the National Council for Special Education (NCSE) developed some guidelines for parents/guardians of children with SEN to serve as tips on how to prepare their children for starting school (NCSE, 2016). Apart from the guidelines, normally, schools hold information meetings for parents of young children with special educational needs, in the year before they start school. The planning meeting normally includes parents, the school principal and if possible the class teacher and if necessary other professionals who have been involved with the child before he/she starts school. At this planning meeting, parents are advised to let the school know any particular anxieties the child has about starting school. It is also important to give the school any information that might help the school to meet his/her needs. This includes any relevant professional reports (e.g. reports written by psychologists, speech and language therapists, occupational therapists and so on) as these can help to ensure that the school is aware of the child's strengths, abilities and needs. Parents find it useful to attend these meetings as they hear about the various educational supports and settings that are available for their children. In Finland and Lebanon too, they have an early intervention programmes that provide developmental and therapy services for young children with mild disabilities who can cope academically with the curriculum requirements, but need extra support (Al Hout, 2017).

The study: rationale, purpose and research questions

Whereas all these examples have been cited from developed countries, little is evident and documented from developing countries including Tanzania. Much of what is largely available in Tanzania, for example, is related to studies on the challenges and barriers of mainstreaming of children with disabilities and SEN in regular schools (Krohn-Nydal, 2008; Tungaraza, 2014; Possi & Milinga, 2017; UNICEF, 2017; Said, 2017 ; Juhudi, 2018). So far to the best of my knowledge, no study has been done in Tanzania, to investigate the transitional process followed before children with SEN start schooling and how parents and teachers are engaged in preparing these children to start schooling smoothly.

The aim of this study was therefore, to examine the engagement of parents and teachers in preparing children with SEN to transit for the first time from home to school environment to start schooling. It was expected that on the basis of the data collected, this study would shed light into how smooth and successful children with SEN in the Tanzanian context should be prepared to start schooling.

The study was guided by the following research questions:

- In what ways do parents prepare their children with SEN to transit from home environment to school?
- How do teachers support children with SEN to adjust to the demands of starting school?
- What challenges do parents and teachers experience in the process of preparing children to transit from home environment to start schooling?

Theoretical framework

This study was informed by ecological systems theory developed by Bronfenbrenner (1979). The theory recognises the role played by the environment in which a child operates. In the context of this study, it implies that children's transition to school is not only dependent or influenced by the nature of learning disability of the child but also on parents, schools, peers and their relationships as well as on the socio-economic and cultural context within which the child lives. The theory was considered practical for this study because it emphasizes on the interrelationships of the sub-systems in the sense that if one system fails to work together, it will have negative effects on the other subsystems.

Methodology

The study was guided by interpretivist research paradigm because of its philosophical underpinnings which usually focus on meaning and assume that each individual has

his/her own point of view or way of perceiving and interpreting a phenomenon. In this view, interpretivists assume that knowledge is constructed subjectively from different individual experiences. The role of the researcher is to enable participants in the study to attach meanings to the events and phenomenon around them. For that matter, it becomes important, then, to conduct studies in the “field,” where the participants live and work since these are important contexts for understanding what the participants are saying. Methodologically, interpretivists believe in flexibility and in methods of data collection such as interviews which give room to participants to create their own social world, meanings and understanding of the topic under study. Based on the interpretivist philosophical stance, this study considered qualitative research approach to be the most suitable. Operating within this perspective, the researcher entered into the key informants (parents and teachers) personal world to gain deeper and clear understanding of how they prepare their children with SEN to start school and the challenges experienced in this process.

The study was conducted in Kinondoni district in Dar es Salaam Region and Kibondo district in Kigoma Region. The selection of Dar es Salaam was based on the fact that Dar es Salaam was the first region in the country to practise inclusive education. It was also reported to have registered more children with disability than any other region in the country (President’s Office Regional Administration and Local Government, 2018). Kigoma Region and specifically Kibondo district, was also considered appropriate for this study since it has also registered many children with disabilities. According to the Tanzania Disability Monograph more children with disabilities who never attend school, come from rural areas like Kibondo largely because of lack of awareness among parents (URT, 2019). Besides, the Education Sector Performance Report for Tanzania Mainland by MoEST (URT, 2022) shows that at primary school level; Kigoma Region had the least Gross Enrolment Ratio (GER) in the country (89. 6%) which suggests that there are still large numbers of out-of-school children.

With regard to research design, the study employed a case study design which allowed multiple cases to be assessed. Eighty four participants were involved in the study including 45 parents, 21 teachers, 8 head teachers and 2 DSEOs. Purposive sampling as well as snowballing and convenient sampling techniques were used to obtain the sample size of the study. In depth semi-structured interviews, FGD, non-participant observation and documentary review were used to obtain the required data for the study. In particular, parents and teachers provided information on the activities they performed in preparing and helping children with SEN to start schooling and the challenges experienced in that process. The DSEO was consulted as a representative of the government to provide official information

related to policy matters and the support provided by the government to facilitate smooth transition to school for children with SEN. Data collected through these various methods were subjected to thematic data analysis to make sense and create useful meaning as per objectives of the study.

Findings and Discussion

In this section, findings from the field on how parents and teachers prepared and helped children with SEN to transit from the home environment to school for the first time are presented, analysed and discussed. Similarly, the challenges experienced by parents and teachers in the process of preparing and enabling children with SEN to start schooling are also presented and discussed.

Parents' ways of preparing children with SEN to start schooling

Parents' preparation of their children with SEN to start schooling was marked by specific activities. The first and unique distinctive activity from other parents with school-age children but without SEN was seeking for medical prescription certification. Each respective parent was obliged to consult with medical doctors to assess the child with SEN and make diagnosis on the type and magnitude of the disability that might affect learning. The certificate was a mandatory condition before registration and proper placement of the child either in an inclusive class or special educational need class.

After the medical certificate was obtained, the second activity was buying common basic school materials like school uniforms, shoes and stationery items such as exercise books and pencils as well as school bags. This was a common and generic preparation for any school-age children earmarked to start school. Normally, parents get information about the school materials when they meet the special education teachers in a joint parent meeting before the beginning of a new school calendar.

First we were called to attend a joint meeting where we were informed about inclusive schools and the possibilities of our children with SEN to get education. At the meeting, the teachers also informed us on the different basic materials which a child needs to begin school. These include school uniforms, shoes and stationery items. I had to buy them. This is how I prepared my son to go to school.

Parents also narrated that preparing a child with SEN to start schooling does not only end up with buying school materials. Since the majority of children with SEN could not independently walk to the inclusive schools, parents had also to think on how they would get the children to school and the means to make this possible.

At the family level, it also involves sitting down, discussing and agreeing on how the child will get to school, who will do that, and by which means. For parents, this was indeed a challenging activity because their life style had to change to accommodate escorting the child to school. Sometimes, it involved one to sacrifice himself/herself like quitting jobs, relocating working areas and time adjustments to fit in the child's school schedule. One parent (mother) had this to say:

We were excited to learn that our son who had autism and intellectual impairment could learn something at school. But sending him to school was something we had to sit down as a family and discuss. One of us had to escort him to school. My husband and I are both civil servants. As a mother, I had no choice. I went to see my employer and requested for re-location of my working station. He could understand my intension. I was allowed to transfer to this new working station which is very close to the school.

It is important to note that parents of children with SEN varied in terms of educational level, socio-economic status, as well as knowledge and awareness about disability. The differences in their demographical characteristics influenced the way they got information about the available educational opportunities for children with SEN and the way they engaged themselves in preparing their children with SEN to start school. Parents who were well educated, knowledgeable, and who were economically-advantaged perceived their children with SEN from the human rights model and did whatever was possible to prepare them to start school. They believed that having a child with SEN does not make anyone less of a person. Through personal initiatives such parents even looked for proper information from medical practitioners and checked for suitable inclusive schools to enable their children to start school.

My daughter was diagnosed to have moderate autism although she is also intellectually impaired. After I was told that my daughter can also learn something I was very happy that day. But I was also very much curious about how she was going to learn. So I made a follow up to the refereed nearby inclusive school. The teachers welcomed me and informed me that the main emphasis was to help these children learn the basic things in life like greetings, brushing their teeth, holding a spoon and self-feeding before they move into the formal school curriculum. I was impressed.

Teachers ways of supporting and preparing children with SEN to enrol into school

The study observed that the role of special education teachers begins with identification of all school-age children with disabilities and their geographical location. With the assistance of local leaders, special education teachers would go to the villages/communities to identify school-age children with SEN and mobilise parents to enrol them into school.

The teachers also advise parents to send their children to recognised medical practitioners for diagnosis and assessment of the nature and type of disability. Consulting medical practitioners was to be done prior to sending the children to school for registration since some children need medical attention or treatment and have to take medicine while at school. One teacher had this to say: *“Some children especially those with extreme autism have to take drugs to calm them down and those with limited or no control of short or long calls have to be served with diapers.”*

The findings also indicated that teachers played a sensitization and counselling role for parents who were psychologically desperate and unwilling to prepare and allow their children with SEN to start school. According to the teachers, such parents had low self-esteem and had lost hope over their children. They did not believe that their children with SEN were able to learn as other children. They looked sad and desperate as indicated by one parent: *Sending this child to school is not something one can be excited and be proud of. After all what will she learn? And what will be next? The doors for a bright future are already closed.*

Parents like this, especially those with low education level and those with continued ill-belief about disability viewed preparing children with SEN to start school as a worthless investment without any promising added value for the future of the child. Such parents had low self-esteem and lost hope over their children. Therefore, teachers had to counsel and help them to understand that children with SEN can also learn.

Likewise, teachers had to plan well on how to receive and orient children with SEN to the new environment of the school. They must make sure that there is a space (special classroom) for these children because they cannot be integrated in inclusive classrooms with children without disabilities. Also they have to ensure that there are adequate facilities and stationery to enable these children learn.

It was further noted that when teachers receive the children during the early days at school, they continue providing supportive services such as medical referrals to

children who require medical attention. For parents who come with their children directly to school with no prior knowledge that their children require or may require medical attention, teachers have to let the parents know that they need to visit the hospitals and get medical attention for their children. A teacher from one of the schools in Kinondoni District which serves children with intellectual impairment stated:

Our school has been identified to receive children with intellectual disability and autism. Majority of those children with extreme autism came with their medicines to calm them down. There are situations when they become very aggressive and irritative. In such situations, we have to be very close and handle them with care.

Teachers also provide special attention and needs to children with severe, profound and multiple disabilities including making sure there is careful administration of their medicines while at school. They work together with the first aid teachers within the school and for those with boarding facilities they also collaborate with matrons and patrons: *We have to double check and at times consult with medical practitioners to ensure that the drugs have really been prescribed by certified medical doctor. We also need to know when and how to keep and administer them.*

From this quotation, one can note that teachers play multiple roles in the absence of other professionals like school nurses or school psychologists. This is contrary to the practice reported in other developed countries like Finland where there is normally a multi-agency care comprising the principal, the special teacher, the school nurse, the school psychologist, a social worker and the teachers; all working together to assist children with SEN (Al Hout, 2017).

Challenges experienced in the process of preparing children with SEN to start school

Parents and teachers encountered several challenges as they prepared children with SEN to transit from home to school. These challenges are presented and discussed hereunder:

Challenges experienced by parents

One of the challenges which was mentioned by almost all parents was the costs involved in preparing and enabling children with SEN to start schooling. Findings from the study indicated that the costs involved in preparing and enabling a child of SEN to start and remain in school was very high compared to a normal abled child. Throughout this study parents also stressed about the emotional costs and

described the processes by which their families had to adjust to the needs of the child. Although primary education has always been fee-free in Tanzania (at least at theoretical level), Dachi (2000), observed that there are still some hidden costs that parents of children with disabilities and SEN have to bear. Some parents with children with physical disability and motor problems, for example, expressed a concern about lack of suitable equipment such as wheelchairs and/or clutches. Even when clutches and wheelchairs were available, the challenges of navigating unmade roads and a limited transport system especially in the rural areas were evident. All these are extra costs to be shouldered by parents with SEN children.

Much as I am very thankful to the government for providing special schools for our children with disability, I am currently at the crossroad given the nature of disability of my child. He needs a wheel chair and someone to assist him to move the child around. The wheel chair is costly.

These findings are not unique to Tanzania alone. Studies conducted in India (Limaye, 2016) and Uganda (Moyi, 2012), for example, have all established that socio-economic disadvantaged families were at high risk of failing to send their children with SEN because of the costs involved to meet their needs. Due to transportation cost and parents not having time to accompany children to school, parents are often forced to make a choice between providing education to a child with SEN and without a disability. Findings also show that the more the severity of a child's disability, the lower the chances of the child to attend school.

The long process of getting a child with disability enrolled in the school system was mentioned as another stumbling block for parents to make preparation for their children to make smooth transition to school. Before a child is accepted in an inclusive school he/she has to be assessed by a medical practitioner to get a confirmation certificate of the child's type of disability and if there was any medical attention /treatment needed. Medical doctors also determine if a child is eligible for special education support and services. Technically, this is an important requirement and step not advisable to skip. Teachers need to be well informed and advised by medical practitioners accordingly. Some of the parents who participated in this study considered this requirement as cumbersome, unnecessarily bureaucratic as well as time-consuming especially for parents who were not staying close to the hospital. One parent who had a son with autism had this to say:

When I arrived at school I was told my son could not start right away. I was then re-directed to go to the hospital first to get a document from the doctor to confirm the nature and status of disability of my son. I was

disappointed because this was not easy for me. I stay very far from the district hospital and it is tough to move with my son in his condition.

In rural remote areas of Kibondo district, for example, this step was not very practical because the district hospital is not accessible to distant communities. Therefore, parents just take their children with disabilities to school for the teachers themselves to carry out initial assessment and identification. Some teachers understood the real situation and accepted the children without the medical certificate especially where they felt the disability was not very complex. Otherwise, parents were advised to go and seek for the medical confirmation. In an interview with parents, it was clear that for some parents the morale to enrol their children was low and they were doing this because they had been told by local leaders to do so.

I wanted my child to go to school like the rest, so I had no choice but to comply and look for the documents. Worse still I had to carry my son along with me. It was not easy at all. As you can see my son has intellectual impairment. It was not only costly for me but an unpleasant experience as well.

For some parents being told to go back for medical diagnosis and certification was more or less like a permit to go back home forever. For educated parents who were aware of the importance of education and who wanted their children with disabilities to learn something the situation was different. They were willing to take their children for the medical diagnosis and certification before taking them to school for registration as can be seen in this interview extract:

The teachers informed me to go to the diagnostic centre to meet medical practitioners to be given a medical certificate. It was a requirement because the teachers had to be sure of how best to handle my son. I was determined to get my child with intellectual impairment to school.

Challenges experienced by teachers

One of the challenges expressed by teachers in all focused group discussions was continued myths and misconception about children with SEN. This study established that some parents, relatives and the community at large still hold the cultural beliefs about disability in which disability is often blamed to have been caused by misdeeds of ancestors and parents and or supernatural forces, punishment or will from God. Mothers were often blamed when they give birth to such children as can be seen from this interview extract which was emotionally shared by a mother of a child with SEN in Kibondo district:

My child has cerebral palsy and her development has been slow and problematic. My in-laws despise me by saying I have brought bad luck. Hence, this becomes a source of sorrow and agony in the family. She says because of my bad luck I am being punished by ancestors and Gods. As a mother I am very much hurt and traumatized.

From this interview one can easily note the misconception and ill belief which is still evident in people's mind about children with SEN. According to one teacher, the sister-in-law who was a very close relative was supposed to be a source of relief and encouragement. But she turned out to be a source of grief and discouragement.

The situation was found to be more critical where the child was born with disability and there was no clearly known and scientific reason for explaining the cause of such disability. A good example is the case of Autism Spectrum Disorder (ASD) where until to-date there is no scientific consensus about the cause of such condition (Manji, 2018). In a systemic search and an extensive survey of the existing information about ASD in Tanzania, this professional and medical expert in autism noted that there is very limited information available on children with Autism in Tanzania although the cases for such condition are currently becoming more prevalent.

This false belief about children with disabilities and SEN is not only evident in Tanzania. Odongo (2018) in Kenya noted that a good majority of people still believe that a disability is retribution for past wrong deeds committed. Baker, Lund, Nyathi, & Taylor (2010) observed that in Zimbabwe and South Africa, witchdoctors created a market of body parts of people with albinism believing that people who take these body parts will be lucky in the mining boom of gold and diamond. Certainly, children who are met by these ill beliefs and attitudes can hardly develop to their full potential.

Parents' delayed identification of their children's learning difficulty and associated intervention was another main challenge which teachers mainly faced as they tried to sensitize and mobilise parents to enrol children with SEN into school. Early identification and intervention of children with special educational needs is absolutely important. The earlier a problem is identified, the better the outcomes of intervention. These problems especially those related with intellectual and developmental disorders can emerge early in childhood and become progressively worse if not treated. One of the teachers gave an example of how they met one parent who was struggling with a 13 aged son who had severe autism but had done nothing other than tying him with ropes around his feet and arms to prohibit him from movement because of lack of knowledge. According to this teacher, the parents desperately explained that their child was destructive and at times he

used to hurt himself as if he had no feelings. Probably, with early identification, the parents would have been made aware of the disorder and got support on time instead of locking and hiding the child inside the house. As affirmed by Manji (2018), with early identification and intervention, children with autism can be very successful in school and develop to their full potential.

It is important to note that not every child is born with well-known and visible disability which can easily predict learning difficulties in future. Sometimes even parents may not be aware that they have a child with SEN if the disability is not noticeable like mild hearing impairment, slow learning, mild autism or low vision. In case of mild autism, some parents think that their child is just naughty; over reactive, non-interactive with disruptive behaviours just to find out later that the child is autistic. The teachers learned from the parents that sometimes, there were no alarming visible physical defect and parents assumed that the unusual behaviours and developmental delays were just temporary disorders that would be cleared with time. Therefore, parents do not do anything and just keep the child until when other symptoms started to show up and find that it was too late for an intervention.

Whereas in high income countries they offer the array of programs and design a range of disability support services for children to promote social adjustment and prepare them to start schooling smoothly. The same is not evident in Tanzania. Majority of parents especially those located in rural and geographically disadvantaged areas get to know that their children have some problems with associated learning difficulties at the time when they have to enrol their children into schooling. In Finland as observed by Perry & Wilson (2015), the focus on early identification begins long before children start school, with a network of child health clinics providing regular assessments of the social, physical and mental development of babies and pre-school children. Multi-disciplinary teams comprising a nurse, doctor, speech therapist and psychologist make evaluations with the aim of identifying development risks.

Conclusions

Overall, this study indicates that parents and teachers have a big role to play in preparing and enabling children with SEN to transit smoothly from home to school. Nonetheless, this study indicates that preparing a child with SEN to enrol in school is not a simple and trouble-free process. It has some financial, psychological and emotional implications. For example, while parents may be willing to enrol their children with SEN to school, this is shortened by several challenges; some of which are beyond parents' personal control. Similarly, much as teachers would wish to see children with SEN enrolled in school, this is also curtailed by

some lack of cooperation from parents especially those who are overprotective and who still believe that it was a worthless investment to enrol a child with SEN in school. This is accompanied with a delayed diagnosis and identification of the children's nature of disability and its effect on learning make the engagement of teachers in supporting and preparing children with SEN to start schooling smoothly real challenging.

As a whole, it is also important to note at this point that this study was conducted in two districts only in Tanzania. The findings may not claim to be conclusive and generalisable. However, they are adequate and have shed light into the dynamics of preparing children with SEN to start schooling as experienced by parents and teachers. Certainly, these findings and subsequent recommendations may be applicable to other districts in Tanzania with similar features.

Recommendations

Based on the findings and conclusions, it is recommended that there is need for continued sensitization and awareness raising campaign among parents and the community as a whole on the facts about disability and children with SEN in particular. Parents who are knowledgeable about disability and have managed to enrol their children in school can form a valuable team to share their practical experiences and evidence that children with SEN can learn some valuable and useful things.

Given the fact that disability is a natural part of human diversity that must be respected and supported in all its forms, there is also a need for a shared commitment between the government on the one part and parents and communities on the other part in ensuring that children with SEN also access educational facilities near their families. Continued efforts should also be made even by the communities and other educational stakeholders to assist children with SEN with the necessary learning materials, devices and equipment.

This study has shown that early diagnosis and identification was not a common practice in all schools in Tanzania, there is need for the government to institute within its health and education policies and practices the diagnosis and early identification of disability and learning abnormalities among children. The sooner learning the disabilities are diagnosed and treated, the more likely children are able to reach their potentials.

Finally, the government should also consider providing continued in-service training to teachers to enable them to identify children's learning needs and assist them accordingly.

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